COUNCIL OF REVIEW COMMITTEE CHAIRS

Relevant Excerpts from ACGME Bylaws, Policies, and Procedures
(approved February, 2008)

From ACGME Bylaws, Article IX, Sections 1-8:
ACGME REVIEW COMMITTEES

ARTICLE IX - REVIEW COMMITTEES

Section 1. **RRC Appointing Organizations and RRC Members:** The Board of Directors of the ACGME may appoint organizations ("RRC appointing organizations"), which may appoint voting members of Residency Review Committees subject to confirmation by the Board of Directors of the ACGME. RRC appointing organizations may be added, changed, or deleted upon unanimous recommendation of the existing RRC appointing organizations for that RRC and approval by the Board of Directors. In addition, one resident physician in each Residency Review Committee. Exceptions to this policy may be granted after application to and approval by the Board of Directors. Residency Review Committees shall function under policies and procedures approved by the Board of Directors.

Section 2. **Institutional Review and Transitional-Year Committee:** The Executive Committee shall appoint ten voting members of the Institutional Review Committee and nine voting members of the Transitional-Year Review Committee, including one resident physician member of each committee, subject to confirmation by the Board of Directors. The Institutional Review Committee and Transitional-Year Review Committee shall function under policies and procedures approved by the Board of Directors.

Section 3. **Employees of Members and RRC Appointing Organizations.** No employee of a member of the ACGME or any RRC appointing organization shall serve as a voting member of a Review Committee.

Section 4. **Duty of Review Committee Members to ACGME:** A Review Committee member shall discharge his or her duties as a Review Committee member in a manner he or she reasonably believes to be in the interests of the ACGME.

Section 5. **Removal of Review Committee Members:** A Review Committee member may be removed by a majority vote of the Board of Directors whenever in its judgment the best interests of the ACGME would be served thereby.

Section 6. **Council of Review Committee Chairs:** The Council of Review Committee Chairs shall consist of the Chair of each Review Committee, including the TYRC, the IRC, and the two resident physician directors. The Council of Review Committee Chairs shall elect a Chair to serve a two-year term. The Chair of the Council of Review Committee Chairs shall be a Chair of a Review Committee at the time of election to the Chair, but need not be either a Chair or a member of a Review Committee for the duration of the two-year term as Chair. The Council of Review Committee Chairs shall function under policies and procedures approved by the Board of Directors. The Council for Review Committee Chairs shall not have the power to bind the ACGME.
Section 8. Removal of Council Chairs: A Council Chair may be removed by a majority vote of the Board of Directors whenever in its judgment the best interests of the ACGME would be served thereby. If a Council Chair is removed, the affected Council shall elect a new Chair to fulfill the unexpired term of the removed Chair.

From ACGME Bylaws, Article XI, Sections 1-5:
REVIEW COMMITTEE PROCEDURES

ARTICLE XI - MODUS OPERANDI

Section 1. Establishing Institutional Requirements and Program Requirements for Institutional and Program Evaluations:

a) Institutional Requirements: The Board of Directors shall adopt Institutional Requirements for all institutions that sponsor ACGME accredited graduate medical education programs. The Institutional Requirements may be approved by a majority vote of the directors present and voting at any regular meeting of the Board of Directors at which a quorum is present, provided that the proposed change has been previously submitted in writing to the directors for review and comment.

b) Program Requirements: Each Review Committee shall prepare Program Requirements for the specialty programs over which it has cognizance. The Program Requirements shall be approved by the respective Review Committees, after review and comment by their Review Committee appointing organizations, and then submitted for approval by the Board of Directors. Program Requirements may be approved by a majority vote of the directors present and voting at any regular meeting of the Board of Directors at which a quorum is present.

Section 2. Accreditation:

a) Except as provided under Article XI, Subsection 2(c) of these Bylaws, the Residency Review Committees shall evaluate and make recommendations regarding the accreditation of programs in graduate medical education in accordance with the Institutional and applicable Program Requirements, notify program directors of their recommendations, and submit their recommendations to the Board of Directors.

b) The Board of Directors shall accredit programs in accordance with the Institutional and applicable Program Requirements, following receipt of the recommendation from the appropriate RRC, and shall promptly notify the program directors of its determination. The Board of Directors may establish procedures to delegate its accreditation authority to an appeals panel which includes the Executive Committee for appeals from expedited accreditation actions.

c) Upon application of a Review Committee, including RRCs, the IRC, and the TYRC, and following a review of its performance, the Board of Directors may
delegate accreditation authority to the Review Committee. Such delegation shall be for a period to be determined by the Board of Directors. The Board of Directors shall conduct periodic reviews of the accreditation process of the Review Committee and of its authority to accredit.

d) The Board of Directors shall have published annually the Institutional and Program Requirements for accreditation of institutions and programs in graduate medical education and the list of accredited institutions and programs.

Section 3. Accreditation Procedures: The Board of Directors shall be responsible for establishing the procedures for accreditation. Consideration may be given to the recommendations of medical specialty organizations and other interested parties.

Section 4. Appeals: In case of an adverse decision, as defined by the Board of Directors, the program or sponsoring institution shall be entitled to request a hearing before an appeals panel according to procedures promulgated by the Board of Directors.

Section 5. Records: Records pertaining to accreditation of programs in graduate medical education are the property of the ACGME.

Section 6. New Activities: Subject to Article V, Section 13(b)(i), new activities must be approved by a majority vote of the directors present and voting at any regular meeting of the Board of Directors at which a quorum is present.
From ACGME Policies and Procedures, I.A-D: PURPOSE OF ACCREDITATION

I. STRUCTURE AND FUNCTION

A. Description

The Accreditation Council for Graduate Medical Education (ACGME) is a separately incorporated non-governmental organization responsible for the accreditation of Graduate Medical Education (GME) programs. The scope of ACGME accreditation extends to those institutions and programs in GME within the jurisdiction of the United States of America, its territories and possessions. The ACGME has five member organizations:

- The American Board of Medical Specialties (ABMS)
- The American Hospital Association (AHA)
- The American Medical Association (AMA)
- The Association of American Medical Colleges (AAMC)
- The Council of Medical Specialty Societies (CMSS)

Each member organization nominates four individuals to the ACGME’s Board of Directors. In addition, the Board of Directors includes three public directors, two resident directors, and the chair of the Council of Review Committee Chairs. A representative of the federal government may, without vote, attend meetings of the Board.

Under the authority of the ACGME, accreditation of GME programs is carried out by Review Committees. The term “Review Committee” is used to denote a Residency Review Committee, the Transitional Year Review Committee, and the Institutional Review Committee.

B. ACGME Mission

We improve health care by assessing and advancing the quality of resident physicians’ education through accreditation.

ACGME Approved: 9/13/05

C. Purpose of Accreditation

At its meeting on February 13-14, 1984, the ACGME voted to reaffirm the statement of the purpose of accreditation. This statement was originally adopted by the Liaison Committee on Graduate Medical Education, the predecessor organization of the ACGME, at its November 17-18, 1980 meeting.

The ACGME reaffirmed its policy that in the accrediting process, the ACGME is not intent upon establishing numbers of practicing physicians in the various specialties in the country, but rather that the purpose of accrediting by the ACGME is to accredit those programs which meet the minimum standards as outlined in the institutional and program requirements. The purpose of accreditation is to provide for training programs of good educational quality in each medical specialty.
This resolution remains the policy of the ACGME.

D. Definition of Accreditation

Accreditation of residency programs and sponsoring institutions by the ACGME is a voluntary process of evaluation and review performed by a non-governmental agency of peers. The goals of the process are to evaluate, improve, and publicly recognize programs or sponsoring institutions in GME that are in substantial compliance with standards of educational quality established by the ACGME. Accreditation was developed to benefit the public, protect the interests of residents, and improve the quality of teaching, learning, research, and professional practice.

FROM ACGME POLICIES AND PROCEDURES, I.G.:
COUNCIL OF REVIEW COMMITTEE CHAIRS

E. Councils of the ACGME

1. Description

The ACGME is advised in matters pertaining to GME and accreditation by two Councils: the Council of Review Committee Chairs, and the Council of Review Committee Residents.

a) Meetings

The ACGME Councils shall meet at the time of the regular meetings of the ACGME Board of Directors and at such other times as may become necessary.

b) Reporting

These Councils shall report at the plenary sessions of the ACGME and to the Executive Committee as appropriate.

c) Compensation

Members of the Councils shall receive no financial compensation for their services, but shall be reimbursed for travel and other necessary expenses incurred in fulfilling their duties as Council members, in accordance with Article X of the Bylaws.

d) Composition

In general, only members of Review Committees may hold membership in the two ACGME Councils.
2. Council of Review Committee Chairs

a) Composition

The Council of Review Committee Chairs (Council of Chairs) comprises the current chairs of all Review Committees and two resident ACGME directors. A representative from the Royal College of Physicians and Surgeons of Canada, and a representative from the Organization of Program Director Associations are official observers. A representative from the Veterans Administration is an invited observer.

The Council of Chairs shall elect its Chair from among its own members. The Chair of the Council of Chairs shall serve a single term of two years. The Chair must be a chair of a Review Committee at the time of election, but need not be a Chair or member of a Review Committee for the duration of the two-year term. The Chair of the Council of Chairs shall serve as a voting member of the Committee on Strategic Initiatives and shall serve as an ACGME director with vote.

The Council of Chairs shall also elect its Vice-chair from among its own members for a one-year term. The Vice-chair shall be eligible for election as the Chair upon expiration of his or her term as the Vice-chair, but may or may not be elected Chair.

The Vice-chair of the Council of Chairs shall be appointed as an ex officio member, without vote, to serve as a liaison between the Council of Chairs and the Committee on Requirements.

Any additional appointments to ACGME Committees from the Council of Chairs shall be determined by the Executive Committee of the ACGME Board of Directors.

b) Operational Guidelines for Inter-specialty Conflicts and Revisions of Program Requirements

In addition to its advisory role, the Council of Chairs also shall serve as an intermediary between Review Committees in the resolution of inter-specialty conflicts, and in the revision of the common program requirements, in accordance with the procedures indicated below.

(1) Inter-specialty Conflicts about the Accreditation of New Subspecialty Programs

(a) Review Committees that intend to initiate accreditation of programs in a new subspecialty must inform in writing the chairs of all other Review Committees through the Council of Chairs.
(b) Review Committee chairs who have concerns about the impact of the proposed subspecialty on education in their specialty should express this concern in writing to the Review Committee Chair that is initiating the subspecialty, with a copy also submitted to the chair of the Council of Chairs.

(c) If significant concerns have been expressed by a Review Committee as outlined above, the chair of the Council of Chairs shall propose a means for the concerned relevant parties to discuss the issues, usually through their meeting under the leadership of the Council of Chairs or a designated substitute at the time of a regularly scheduled ACGME Board meeting. If other meeting arrangements are necessary, the chair of the Council of Chairs shall request funding for this purpose from the ACGME.

(d) The chair of the Council of Chairs shall report the results of the meeting(s) to the full Council of Chairs and to the ACGME Executive Committee. The chair of the relevant Review Committee shall respond to this report as part of the Impact Statement that is distributed with the requirements.

(2) Inter-specialty Conflicts about Revision of Currently Approved Requirements

When the requirements of any currently approved specialty or subspecialty have been completed and distributed with the Impact Statement, any Review Committee chair who believes the proposed requirements will have an adverse impact on the education of residents/fellows in his or her specialty should express this concern in writing to the Review Committee Chair that is initiating the requirements and may request the Council of Chairs to convene a meeting of interested parties to discuss and address the perceived conflicts. The Council of Chairs shall proceed as in Section I.G.2.b)(1)(b)-(d) above.

(3) Inter-specialty Conflicts about Accreditation of Multidisciplinary Subspecialties

(a) When a Review Committee seeks ACGME approval to offer accreditation in an existing ACGME-approved subspecialty, the Review Committee must notify the Review Committees currently offering accreditation in the subspecialty of its intent to seek ACGME approval to offer accreditation in the subspecialty.
(b) If one or more Review Committee expresses concern regarding the impact of this change on education of fellows in the subspecialty, the Review Committee(s) should express this concern in writing to the Review Committee Chair that is seeking to offer accreditation in the subspecialty, with a copy to the chair of the Council of Chairs.

(c) If significant concerns have been expressed by a Review Committee, the chair of the Council of Chairs shall propose a means for the concerned relevant parties to discuss the issues, under the leadership of the Council of Chairs or a designated substitute. This is usually done at the time of a regularly scheduled ACGME Board meeting. If other meeting arrangements are necessary, the chair of the Council of Chairs shall request funding from the ACGME.

(d) The chair of the Council of Chairs shall report the results of the meeting(s) to the full Council of Chairs and to the ACGME Executive Committee. The chair of the relevant Review Committee shall address this report as part of the request to offer accreditation in the subspecialty that is submitted to the ACGME.

(4) Revisions to the Common Program Requirements

(a) The Council of Chairs is responsible for maintaining and initiating revisions to the ACGME’s Common Program Requirements. Proposed revisions to the Common Program Requirements may, however, be submitted by any member of the community of interest (e.g., program director, resident, Review Committee, Designated Institutional Official, appointing organization or member organization), or by a standing committee or council of the ACGME or its Board of Directors.

(b) The Council of Chairs staff shall bring the proposals to the attention of the Council of Chairs annually or as necessary. If revision is required due to state statute or federal law, such revisions shall take precedence. Proposals for revision should occur at infrequent intervals, but not less than five years.

(c) Revisions to the Common Program Requirements by the Council of Review Committee Chairs shall be conducted by following the standard ACGME procedures for revision of requirements.
From ACGME Policies and Procedures, I.F.4.d: REVISION OF REQUIREMENTS

d) Procedures for Revision of Requirements

(1) All Review Committees must review their respective requirements every five years. Likewise, the Council of Review Committee Chairs must review the ACGME Common Program Requirements every five years. If during this review, the Review Committee or Council determines that no changes are required, the Review Committee or Council should notify the Committee on Requirements in writing of this decision. If the Review Committee or Council determines that changes are required, the Review Committee or Council should present the proposed revised document for review and approval to the ACGME Board following the stated policies.

(2) Major or substantive changes to the requirements must be considered by the Committee on Requirements.

(3) Minor revisions should be indicated, and only those sections should be considered for review and recommendation by the Committee on Requirements. At the same time, the Committee may make any comments or suggestions regarding the remainder of the document; these in turn shall be forwarded to the Review Committee for consideration and comment by a deadline determined by the Committee on Requirements. This action shall not preclude review and action by the Committee on Requirements on the changes currently proposed.

(4) If, (based upon mutual discussion and agreement between the Committee on Requirements and the Review Committee Chair), further modifications in the document are agreed upon in the course of review, staff may complete the editorial changes before the document is distributed.

e) Disagreement between an ABMS Board and a Review Committee Regarding the Accreditation of Subspecialty Programs.

In those cases in which a Review Committee or the Council of Review Committee Chairs and the associated ABMS Board disagree on the accreditation of subspecialty programs, the Committee on Requirements may arrange for a hearing as described in the Policies and Procedures for Accreditation of New Subspecialty Areas.
When the pertinent ABMS Board(s) does not award a Certificate of Qualifications in an emerging subspecialty and, in addition, when it is opposed to the accreditation of programs in that area, a Review Committee may petition the ACGME to consider the request to begin the accreditation process for that subspecialty as an exception to the criteria stipulated in this document. This request must include documentation that at least three-fourths of the Review Committee members agree that the accreditation of programs in the subspecialty area would benefit patient care, and that the accreditation process should progress regardless of opposition by the relevant board.

If the Committee on Requirements judges that there is an adequate basis for considering the above request, it shall arrange for a hearing to be held at the next ACGME meeting. This hearing shall take place at a designated session of the Committee on Requirements in conjunction with a regular ACGME meeting. Representatives from the Review Committee and the ACGME Board must be invited to participate in the hearing.

In this hearing, the Committee on Requirements shall give due consideration to all points of view, and shall make one of the following recommendations:

1. to recognize the subspecialty as sufficiently well established so that the accreditation of fellowship programs in that area may be considered, or

2. to deny the request of the Review Committee.

If the recommendation of the Committee is to recognize the subspecialty as meriting accreditation of its fellowship programs, the specialty board concerned may petition the ACGME Board for a special hearing by that body. Such a hearing shall be arranged for the next meeting of the ACGME Board.

f) Resolution of Inter-Specialty Conflicts

There may be special circumstances in which the proposed program requirements or the institutional requirements appear to have a significant impact on residency education in other disciplines. In such instances, the procedures for the resolution of inter-specialty conflicts shall be followed (Section I.G.2.b)(1)(b)-(d)). If in accordance with those procedures the written report has been presented to the Committee on Requirements but agreement between the disciplines involved has not been reached, the Committee on Requirements shall make its recommendation to the ACGME Board on the program requirements or institutional requirements after considering all information that it judges relevant and appropriate.
5. Monitoring Committee

a) Purpose

The Monitoring Committee is charged with responsibility to:

(1) evaluate the performance of Review Committees;

(2) monitor, advise, and make recommendations to the ACGME regarding Review Committee activities and delegation of accreditation authority; and,

(3) accrue knowledge about improving accreditation practices by:

(a) developing and distributing summary information regarding the performance of the Review Committees;

(b) identifying and sharing the “best practices” of Review Committees;

(c) suggesting, where appropriate, standardized approaches to requirements;

(d) evaluating the work of relevant Review Committees in assessing compliance with the institutional requirements in single program institutions;

(e) monitoring and assessing the consistent application and enforcement of the standards, including the duty hour standards; and,

(f) reviewing accreditation data and information addressing special issues as directed by the ACGME Board.